



Massachusetts New Car Lemon Law Application for Arbitration

Office of Consumer Affairs and Business Regulation

501 Boylston Street, Suite 5100

Boston, MA 02116

(617) 973 – 8787

Toll Free (888) 283 – 3757

PLEASE READ AND FOLLOW THESE INSTRUCTIONS VERY CAREFULLY.

New Car Lemon Law Arbitration is not for everyone. An Application for Arbitration is not the same as filing a complaint. If you are unsure whether you qualify for Arbitration, please review the New Car Lemon Law section at www.mass.gov/consumer which will give you a detailed explanation of what the law covers.

You must submit **THREE** complete collated copies of all materials, including this application and its required attachments. Do not leave any blank spaces. Do not make references to attachments instead of completing questions. All copies must be legible. Failure to submit **THREE** complete collated copies with all of the required attachments may result in the rejection of your application.

IMPORTANT: PLEASE RETAIN A COMPLETE COPY FOR YOUR OWN RECORDS AS WELL.

Your application for arbitration must be received by the Office of Consumer Affairs and Business Regulation within 18 months of the original date of delivery of the vehicle to you. When your application is received it will be reviewed to make sure it meets the preliminary requirements for acceptance into the arbitration program. If your application is rejected you will be notified by mail of why your wheelchair does not qualify and of other options that may be open to you. If your application is approved, you and the manufacturer will be notified by certified mail and your case will be assigned a hearing date, time, and location.

CHECKLIST: PLEASE USE TO ENSURE ALL DOCUMENTS ARE ENCLOSED.

- ☐ 1. The request for arbitration form
- ☐ 2. The motor vehicle purchase contract or bill of sale
- ☐ 3. A copy of the original motor vehicle registration form (This is a full page document called the RMV1. If you do not have a copy, contact your insurance company and request that a copy be sent to you.)
- ☐ 4. A copy of the current motor vehicle registration
- ☐ 5. The final repair opportunity letter to the manufacturer (or an explanation of the notice you gave them if you do not have it in writing)
- ☐ 6. The manufacturer's written response to the request for refund or replacement, or an explanation of the manufacturer's verbal response
- ☐ 7. Statement of finance charges paid to date from the finance company
- ☐ 8. Any documents related to the repair of the motor vehicle (work orders etc.)
- ☐ 9. Any relevant narrative statements
- ☐ 10. The manufacturer's warranty
- ☐ 11. Receipts for any incidental costs you are claiming

SECTION 1: CONSUMER INFORMATION

Name: _____

Address: _____

City, State, and ZIP Code: _____

Telephone Number: _____

Email Address: _____

SECTION 2: VEHICLE INFORMATION

Manufacturer: _____

Model: _____

Model Year: _____

Vehicle Identification Number (VIN): _____

Name of dealership where you purchased the vehicle: _____

Address of dealership: _____

City, State, and Zip Code of dealership: _____

Telephone Number of dealership: _____

Date contract was signed: _____

Date you took delivery of your vehicle: _____

SECTION 3: VEHICLE DEFECT(S)

List all defects covered under the New Car Lemon Law warranty. Explain how the defect(s) substantially impair the use, safety, or market value of the vehicle. Attach a separate sheet if necessary.

1. Defect: _____

This defect substantially impairs the vehicle's (*check all that apply*)

☐ Use ☐ Safety ☐ Value

Explain how it substantially impairs the use, safety or market value of the vehicle:

2. Defect: _____

This defect substantially impairs the vehicle's (*check all that apply*)

☐ Use ☐ Safety ☐ Value

Explain how it substantially impairs the use, safety or market value of the vehicle:

3. Defect: _____

This defect substantially impairs the vehicle's (*check all that apply*)

☐ Use ☐ Safety ☐ Value

Explain how it substantially impairs the use, safety or market value of the vehicle:

SECTION 3: VEHICLE DEFECT(S) – CONT.

Are any of these defects the result of owner negligence, accident, vandalism, or a repair attempt made by someone other than the manufacturer, its agent or authorized dealer? (Yes / No)

If you answered yes, please explain below:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SECTION 3: VEHICLE DEFECT(S) – CONT.

Within the first year from the date of delivery, your vehicle:

☐

Was repaired three or more times for the same substantial defect?

☐

Was out of service because of repair of any combination of substantial defects for a total of fifteen or more business days?

Please list all repair attempts made under the New Car Lemon Law. Use this chart to document repairs done by the selling dealer **OR** another dealership that the manufacturer assigned.

DEFECT	DATE IN	DATE OUT	NO. OF BUSINESS DAYS IN SHOP	ODOMETER READING
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

Please describe which problems continued to exist or recurred after the 3 attempts or 15 business days, and within the one year and 15,000 mile term of protection.

SECTION 3: VEHICLE DEFECT(S) – CONT.

Was the manufacturer given notice of the seven business day final repair opportunity to repair the vehicle?

If you sent a letter, please enclose a copy. If another method was used, please explain:

On what date did the manufacturer receive notice of the final repair opportunity?

Please explain briefly the manufacturer's response to your request for a final repair opportunity. Enclose copies of any written responses:

If the manufacturer used the final opportunity to attempt repairs, please indicate:

DEFECT	DATE IN	DATE OUT	NO. OF BUSINESS DAYS IN SHOP	ODOMETER READING
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please describe which problems continued to exist or recurred after the final repair opportunity:

Did you inform the manufacturer of these continuing defects and then request a refund or replacement?

Did the manufacturer refuse to refund or replace the vehicle?

SECTION 4: INFORMATION ABOUT EXPENSES INCURRED

Dealer-Added Options: _____

Total Contract Price: _____

Additional Expenses (list all that apply):

Total Finance Charges paid as of _____ (date): Sales Tax: _____

Registration Fees: Extended Warranty: _____

Non-reimbursed Towing Charges _____

Non-reimbursed Costs for Alternate Transportation _____

Repair Charges _____

Credit Life/Disability Insurance: _____

Documentary Preparation Fee: _____

Settlements or Awards Received: _____

Other: _____

Please Note: You are required to bring documentation of these expenses to your arbitration hearing if you have not already included them with this application.

SECTION 5: NARRATIVE STATEMENT (OPTIONAL)

You may include a separate written statement of your experience with your vehicle. Please describe events in chronological order, indicating which problems were and were not repaired each time. Include a separate sheet of paper if necessary.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SECTION 6: REQUEST FOR ARBITRATION

I hereby request that the Office of Consumer Affairs and Business Regulation arbitrate my New Car Lemon Law case. I certify that the manufacturer has not given me a refund or a replacement, and that all statements made in connection with this Request for Arbitration are true to the best of my knowledge. I understand that this document and its attachments are public records.

Signed: _____ Date: _____

If you wish for our office to correspond with an attorney or other individual on your behalf, please include their contact information here:

Name: _____

Law firm (*if applicable*): _____

Address: _____

City, State, Zip Code: _____

Telephone: _____